

CLAIMS ONLY							Application Number 10/705 706	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11							61	
12							62	
13							63	
14	I						64	
15		I					65	
16			I				66	
17				I			67	
18	I						68	
19		I					69	
20		I					70	
21		I					71	
22	I						72	
23		I					73	
24		I					74	
25		I					75	
26		I					76	
27			I				77	
28				I			78	
29					I		79	
30					I		80	
31						I	81	
32						I	82	
33						I	83	
34						I	84	
35						I	85	
36						I	86	
37						I	87	
38						I	88	
39						I	89	
40						I	90	
41						I	91	
42						I	92	
43						I	93	
44						I	94	
45						I	95	
46						I	96	
47						I	97	
48						I	98	
49						I	99	
50						I	100	
Total Indep	3						Total Indep	
Total Depend	10						Total Depend	
Total Claims	13						Total Claims	